Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK, BROOKLYN DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
: !	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Patrice First name	First name
	Bring your picture	Middle name Cummings Stast name and Suffix (Sr., Jr., II, III)	Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0096	

Del	btor 1 Cummings, Patric	ee	Case number (if known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live	431 Remsen Ave	If Debtor 2 lives at a different address:		
		Brooklyn, NY 11212-1150 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Kings			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Debtor 1 Cummings, Patrice				Case number (if known)			
Par	Tell the Court About Y	our Bankruptcy Ca	ase				
7.	The chapter of the Bankruptcy Code you are choosing to file under		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 010)). Also, go to the top of page 1 and check the appropriate box.				
	choosing to me under	■ Chapter 7					
		☐ Chapter 11					
		☐ Chapter 12					
		☐ Chapter 13					
8.	How you will pay the fee	□ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.					
		Filing Fee in I request the not required your family s	Installments (Official Form at my fee be waived (You to, waive your fee, and may ize and you are unable to pa	103A). may request this optio do so only if your inco ay the fee in installmen	on, sign and attach the Application for Individuals to Pay only if you are filing for Chapter 7. By law, a judge may, me is less than 150% of the official poverty line that applicate). If you choose this option, you must fill out the Application and file it with your petition.	but is es to	
9.	Have you filed for bankruptcy within the last 8 years?	■ No.					
		District		When	Case number		
		District		When	Case number		
		District		When	Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No □ Yes.					
		Debtor			Relationship to you		
		District		When	Case number, if known		
		Debtor			Relationship to you		
		District		When	Case number, if known		
11.	Do you rent your	□ No. Go to	line 12.				
	residence?	■ Yes. Has ye	our landlord obtained an evi	ction judgment against	you and do you want to stay in your residence?		
		-	No. Go to line 12.				
		_	Yes. Fill out <i>Initial Statem</i> bankruptcy petition.	ent About an Eviction	Judgment Against You (Form 101A) and file it with this		

Deb	tor 1 Cummings, Patric	e		Case number (if known)	
Dow	Domant About Any Du	-i \	· · · · · · · · · · · · · · · · · · ·	an a Cala Branzista	
Par 12.	Are you a sole proprietor	sinesses	rou Own	as a Sole Proprietor	
	of any full- or part-time business?	No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of business	
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a		Numb	per, Street, City, State & ZIP Code	
	separate sheet and attach it to this petition.		Checi	k the appropriate box to describe your business:	
				Health Care Business (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as defined in 11 U.S.C. § 101(53A))	
				Commodity Broker (as defined in 11 U.S.C. § 101(6))	
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 J.S.C. 1116(1)(B).		
	For a definition of small	■ No.	I am not filing under Chapter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code.	iling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am f	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or Any Property That Needs Immediate Attention	
14.	Do you own or have any property that poses or is	■ No.			
	alleged to pose a threat of imminent and identifiable	☐ Yes.	What is	the hazard?	
	hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
				Number, Street, City, State & Zip Code	

Filed 03/10/17 Entered 03/10/17 12:17:36 Case 1-17-41151-cec Doc 1 Debtor 1 Cummings, Patrice Case number (if known) Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a ☐ I received a briefing from an approved credit I received a briefing from an approved credit briefing about credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. completion. The law requires that you receive a briefing about Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, if any, if any, that you developed with the agency. that you developed with the agency. credit counseling before you file for bankruptcy. You ☐ I received a briefing from an approved credit I received a briefing from an approved credit must truthfully check one of the following choices. If you counseling agency within the 180 days before I counseling agency within the 180 days before I filed filed this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a certificate cannot do so, you are not certificate of completion. of completion. eligible to file. Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you If you file anyway, the court you MUST file a copy of the certificate and payment MUST file a copy of the certificate and payment plan, if any. can dismiss your case, you plan, if any. will lose whatever filing fee you paid, and your creditors I certify that I asked for credit counseling ☐ I certify that I asked for credit counseling services can begin collection from an approved agency, but was unable to obtain services from an approved agency, but was activities again. unable to obtain those services during the 7 those services during the 7 days after I made my request, and exigent circumstances merit a 30-day days after I made my request, and exigent circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were you filed for bankruptcy, and what exigent circumstances unable to obtain it before you filed for bankruptcy, and required you to file this case. what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied with case. your reasons for not receiving a briefing before you filed for Your case may be dismissed if the court is bankruptcy. dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must file If the court is satisfied with your reasons, you must a certificate from the approved agency, along with a copy of still receive a briefing within 30 days after you file. the payment plan you developed, if any. If you do not do so, You must file a certificate from the approved agency, your case may be dismissed. along with a copy of the payment plan you developed, if any. If you do not do so, your case may be Any extension of the 30-day deadline is granted only for dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about ☐ I am not required to receive a briefing about credit counseling because of: credit counseling because of: П Incapacity. Incapacity. I have a mental illness or a mental deficiency I have a mental illness or a mental deficiency that that makes me incapable of realizing or making makes me incapable of realizing or making rational rational decisions about finances. decisions about finances.

Disability.

Active duty.

combat zone.

counseling with the court.

My physical disability causes me to be unable to

the internet, even after I reasonably tried to do so.

I am currently on active military duty in a military

If you believe you are not required to receive a briefing about

credit counseling, you must file a motion for waiver of credit

participate in a briefing in person, by phone, or through

Disability.

tried to do so. Active duty.

military combat zone.

waiver credit counseling with the court.

My physical disability causes me to be unable

to participate in a briefing in person, by phone,

or through the internet, even after I reasonably

I am currently on active military duty in a

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for

Deb	otor 1	Cummings, Patric	е		Case number (if	known)			
Part	t 6:	Answer These Questic	ons for Repo	rting Purposes					
16.		t kind of debts do have?		re your debts primarily consur dividual primarily for a personal, f	ner debts? Consumer debts are defined amily, or household purpose."	in 11 U.S.C.§ 101(8) as "incurred by an			
				No. Go to line 16b.					
				Yes. Go to line 17.					
				Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
				No. Go to line 16c.					
				Yes. Go to line 17.					
			16c. S	tate the type of debts you owe tha	t are not consumer debts or business debt	ts			
17.		you filing under pter 7?	□ No. I	am not filing under Chapter 7. Go	o to line 18.				
	Do you estimate that after any exempt property is excluded and			I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
		administrative expenses are paid that funds will be		■ No					
	avai	lable for distribution nsecured creditors?		□ Yes					
18.		many Creditors do	1 -49		☐ 1,000-5,000	2 5,001-50,000			
		you estimate that you owe?	□ 50-99		5001-10,000	☐ 50,001-100,000			
			☐ 100-199 ☐ 200-999		10,001-25,000	☐ More than100,000			
19.		much do you	\$ 0 - \$50.	000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
		nate your assets to orth?	□ \$50,001 - \$100,000		□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.		much do you	\$0 - \$50	000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estir be?	nate your liabilities to	□ \$50,001	- \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	\$1,000,000,001 - \$10 billion			
			□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
			— \$500,00	1 - \$1 Hillion		·			
Part		Sign Below							
For	you		I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
					n aware that I may proceed, if eligible, und under each chapter, and I choose to proce	der Chapter 7, 11,12, or 13 of title 11, United bed under Chapter 7.			
				y represents me and I did not pay ed and read the notice required by	or agree to pay someone who is not an att 11 U.S.C. § 342(b).	orney to help me fill out this document, I			
			I request rel	ief in accordance with the chapte	er of title 11, United States Code, specifie	d in this petition.			
			case can re		ealing property, or obtaining money or proper prisonment for up to 20 years, or both. 18	erty by fraud in connection with a bankruptcy U.S.C. §§ 152, 1341, 1519, and 3571.			
			Patrice Co	ummings	Signature of Debtor 2				
			Executed or	March 10, 2017	Executed on				
				MM / DD / YYYY	MM / D	DD / YYYY			

Debtor 1 Cummings, Patri	ce	Cas	e number (if known)
For your attorney, if you are represented by one	Chapter 7, 11, 12, or 13 of title 11, United State	es Code, and have explained	ormed the debtor(s) about eligibility to proceed under the relief available under each chapter for which the ce required by 11 U.S.C. § 342(b) and, in a case in
If you are not represented by an attorney, you do not need to file this page.	which § 707(b)(4)(D) applies, certify that I have petition is incorrect.	e no knowledge after an inqui	ry that the information in the schedules filed with the
	/s/ Irene Costello	Date	March 10, 2017
	Signature of Attorney for Debtor		MM / DD / YYYY
	Irene Costello		
	Printed name		
	Shipkevich Law Firm name		
	65 Broadway # 508		
	New York, NY 10006-2538		
	Number, Street, City, State & ZIP Code		
	Contact phone	Email address	icostello@shipkevich.com
	519631 New York		
	Bar number & State		

Certificate Number: 00134-NYE-CC-028861349



CERTIFICATE OF COUNSELING

I CERTIFY that on March 4, 2017, at 9:08 o'clock PM EST, Patrice Cummings received from Cricket Debt Counseling, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of New York, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 4, 2017 By: /s/Jeremy Phillips

Name: Jeremy Phillips

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Filli	n this informat	ion to identify your c	ase:				
Deb		Patrice Cumming					
	•	First Name	Middle Name	Last Name			
Debi (Spou		First Name	Middle Name	Last Name			
Unite	ed States Bankr	uptcy Court for the:	EASTERN DISTRICT O	OF NEW YORK, BROOKLYN DIVISION			
		. ,					
(if kno	e number] Check i	f this is an
						amende	ed filing
Off	icial Forn	n 106Sum					
Sur	nmary of	Your Assets a	and Liabilities a	nd Certain Statistical Informat	ion	12	2/15
infor	mation. Fill out original forms,	all of your schedules	s first; then complete th	are filing together, both are equally responsike information on this form. If you are filing an the box at the top of this page.			
						Your ass	eets
							what you own
1.		Property (Official For				¢.	0.00
	.,					\$	0.00
	1b. Copy line 6	2, Total personal prop	erty, from Schedule A/B			\$	26,220.53
	1c. Copy line 6	3, Total of all property	on Schedule A/B			\$	26,220.53
Part	2: Summari	ze Your Liabilities					
						Your liak	nilities
						Amount y	
2.			ims Secured by Property			¢	0.00
	2a. Copy the to	otal you listed in Colum	nn A <i>Amount of claim,</i> at th	e bottom of the last page of Part 1 of Schedule D		\$	0.00
3.			Insecured Claims (Official (priority unsecured claim)	Form 106E/F) as) from line 6e 3 chedule E/F		\$	0.00
	.,		,	laims) from line 6j &chedule E/F		\$	49.748.00
	ob. Copy the t		(nonphony unocoured o	idinis) from the of B oriedate 27			49,740.00
				Your total lial	oilities \$		49,748.00
Part	3: Summari	ze Your Income and	Expenses				
4.		ur Income(Official For				\$	1,573.59
5.		our Expenses (Official I thly expenses from line				\$	2,267.19
Part	4: Answer T	hese Questions for A	Administrative and Statis	stical Records			
6.	<u> </u>		r Chapters 7, 11, or 13?				
0.			•	eck this box and submit this form to the court with	your othe	r schedule	s.
	■ Yes	-					
7.		lebt do you have?					
	■ Your deb	ts are primarily cons	umer debts. Consumor o	debts are those "incurred by an individual primarily	for a ner	sonal famil	v or household
				ical purposes. 28 U.S.C§ 159.	ioi a peis	ouiai, iaiiill	y, or riouseriolu

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

Debtor 1 Cummings, Patrice Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,475.18

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

				1
Fill in this infor	mation to identify your c	ase and this filing:		
Debtor 1	Patrice Cumming First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK, BROOKLYN DIVISION	
Case number				☐ Check if this is an
				amended filing
Official Ea	arm 106 A /D			
	orm 106A/B	4		
	le A/B: Prop			12/15
think it fits best. I	Be as complete and accurate re space is needed, attach a	e as possible. If two married	ce. If an asset fits in more than one category, lis people are filing together, both are equally respondence. On the top of any additional pages, write your n	onsible for supplying correct
Part 1: Describe	e Each Residence, Building,	Land, or Other Real Estate	You Own or Have an Interest In	
1. Do you own or	have any legal or equitable	interest in any residence, b	uilding, land, or similar property?	
■ No. Go to Pa	art 2.			
☐ Yes. Where	is the property?			
Part 2: Describe	e Your Vehicles			
			cles, whether they are registered or not? Inc	
	•	•	,	
3. Cars, vans, t	rucks, tractors, sport util	ity venicies, motorcycles		
■ No				
☐ Yes				
,			vehicles, other vehicles, and accessories is, snowmobiles, motorcycle accessories	
■ No				
☐ Yes				
			ries from Part 2, including any entries for pa	ages \$0.00
.you nave att	tached for Part 2. Write tr	nat number nere	=>	40.00
Part 3: Describe	e Your Personal and House	hold Items		
Do you own or	have any legal or equital	ble interest in any of the	following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples: M □ No	oods and furnishings lajor appliances, furniture, li	inens, china, kitchenware		
Yes. Desc	Table			\$20.00
	Bed			\$200.00
	Night stan	nt (2)		\$50.00
	Stove	•		\$50.00
	Stove			φ30.00

De	ebtor 1	Cummings,	Patrice		Case number	(if known)	
			Fridge]	\$70.00
	□ No	es: Televisions an including cell	d radios; audio, video, ste phones, cameras, media	ereo, and digital equipment; compu n players, games	uters, printers, scanners; m	usic collections	s; electronic devices
	■ Yes.	Describe	Tv (2)]	\$300.00
			Smart phone]	\$500.00
	Example No		igurines; paintings, prints emorabilia, collectibles	, or other artwork; books, pictures	s, or other art objects; stamp	o, coin, or base	ball card collections; other
9.	Example No	ent for sports an es: Sports, photog instruments		er hobby equipment; bicycles, poc	ol tables, golf clubs, skis; ca	noes and kaya	ks; carpentry tools; musical
10.	■ No		, shotguns, ammunition,	and related equipment			
11.	■ No		thes, furs, leather coats, o	designer wear, shoes, accessories	5		
	■ No		elry, costume jewelry, enq	gagement rings, wedding rings, he	eirloom jewelry, watches, ge	ms, gold, silve	r
	Examp. ■ No	m animals les: Dogs, cats, b	oirds, horses				
	■ No	ner personal and	-	did not already list, including a	ny health aids you did no	t list	
15				m Part 3, including any entries		hed for	\$1,190.00
Pa	rt 4: Des	scribe Your Financ	cial Assets				
Do	you ow	n or have any le	gal or equitable interes	t in any of the following?			Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	□ No		ave in your wallet, in your	home, in a safe deposit box, and	on hand when you file your	petition	

Debtor 1	Cummings, Patrice	Case number (if known)	Case number (if known)	
		Cash	\$20.00	
Exam —	sits of money nples: Checking, savings, or other financial accounts; or institutions. If you have multiple accounts with	certificates of deposit; shares in credit unions, brokerage houses, and ot the same institution, list each.	her similar	
□ No ■ Yes		Institution name:		
	17.1. Checking Account	CapitalOne Bank 2577	\$10.53	
Exam	s, mutual funds, or publicly traded stocks nples: Bond funds, investment accounts with brokerage	e firms, money market accounts		
■ No □ Yes	Institution or issuer name	9:		
joint	publicly traded stock and interests in incorporated venture	and unincorporated businesses, including an interest in an LLC,	partnership, and	
■ No □ Yes	s. Give specific information about them	% of ownership:		
Nego	rnment and corporate bonds and other negotiable otiable instruments include personal checks, cashiers' on negotiable instruments are those you cannot transfer to	checks, promissory notes, and money orders.		
☐ Yes	s. Give specific information about them Issuer name:			
Exan	ement or pension accounts emples: Interests in IRA, ERISA, Keogh, 401(k), 403(b),	, thrift savings accounts, or other pension or profit-sharing plans		
■ No □ Yes	s. List each account separately. Type of account:	Institution name:		
Your : Exam	rity deposits and prepayments share of all unused deposits you have made so that you inples: Agreements with landlords, prepaid rent, public u	ou may continue service or use from a company utilities (electric, gas, water), telecommunications companies, or others		
■ No □ Yes	i	Institution name or individual:		
23. Annui I No	ities (A contract for a periodic payment of money to you	u, either for life or for a number of years)		
	Issuer name and description.			
	sts in an education IRA, in an account in a qualified S.C. $\S\S 530(b)(1)$, $529A(b)$, and $529(b)(1)$.	d ABLE program, or under a qualified state tuition program.		
	Institution name and description. Sepa	arately file the records of any interests.11 U.S.C. § 521(c):		
■ No		han anything listed in line 1), and rights or powers exercisable for	your benefit	
	s. Give specific information about them	an intellectual manager.		
	ts, copyrights, trademarks, trade secrets, and othen nples: Internet domain names, websites, proceeds from			
☐ Yes	s. Give specific information about them			
	ses, franchises, and other general intangibles nples: Building permits, exclusive licenses, cooperative	association holdings, liquor licenses, professional licenses		
	s. Give specific information about them			

De	ebtor 1	Cummings, Patrice	Case number (if known)	
M	oney or p	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	unds owed to you Give specific information about them, including whetle	her you already filed the returns and the tax years	
29.	■ No		rt, child support, maintenance, divorce settlement, property so	ettlement
30.	Examp ■ No	mounts someone owes you les: Unpaid wages, disability insurance payments, di unpaid loans you made to someone else Give specific information	isability benefits, sick pay, vacation pay, workers' compensation	on, Social Security benefits;
31.	<i>Examp</i> □ No	ts in insurance policies les: Health, disability, or life insurance; health saving Name the insurance company of each policy and list Company name:	gs account (HSA); credit, homeowner's, or renter's insurance its value. Beneficiary:	Surrender or refund
		Life Insurance	Deficilitiary.	value: \$25,000.00
	If you a died. No	erest in property that is due you from someone are the beneficiary of a living trust, expect proceeds for the specific information	who has died rom a life insurance policy, or are currently entitled to receive prometers of the contract of th	roperty because someone has
33.	Examp ■ No	against third parties, whether or not you have files: Accidents, employment disputes, insurance clands Describe each claim		
	■ No	ontingent and unliquidated claims of every natu Describe each claim	ure, including counterclaims of the debtor and rights to se	et off claims
	■ No	ancial assets you did not already list Give specific information		
36		he dollar value of all of your entries from Part 4, . Write that number here	including any entries for pages you have attached for	\$25,030.53
Pa	rt 5: Des	scribe Any Business-Related Property You Own or Ha	ve an Interest In. List any real estate in Part 1.	
	_ ′	own or have any legal or equitable interest in any busin	ness-related property?	

No. Go to Part 6.

☐ Yes. Go to line 38.

Deb	tor 1	Cummings, Patrice		Case number (if known)	
Part		scribe Any Farm- and Commercial Fishing-Related Property Yo ou own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	t In.	
46. [Do you	own or have any legal or equitable interest in any farm-	or commercial fishing	-related property?	
	■ No.	Go to Part 7.			
	☐ Yes	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
		have other property of any kind you did not already list	?		
	•	oles: Season tickets, country club membership			
	No Voc	Cive energific information			
_	ı res.	Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
		·		L	
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$0.00
56.	Part 2	2: Total vehicles, line 5	\$0.00		
57.	Part 3	3: Total personal and household items, line 15	\$1,190.00		
58.	Part 4	: Total financial assets, line 36	\$25,030.53		
59.	Part 5	i: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54	+ \$0.00		
62.	Total	personal property. Add lines 56 through 61	\$26,220.53	Copy personal property tota	\$26,220.53
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$26,220.53

Fil	I in this inform	ation to identify your case:				1	
De	ebtor 1	Patrice Cummings					
_		First Name	Middle Name	L	ast Name		
	ebtor 2 oouse if, filing)	First Name	Middle Name	L	ast Name		
Ur	nited States Ban	kruptcy Court for the: EA	STERN DISTRICT OF NE	W YO	ORK, BROOKLYN DIVISION		
Ca	ase number						
	known)					☐ Check if this is an amended filing	
0	fficial For	m 106C					
S	chedule	e C: The Prope	erty You Cla	im	as Exempt	4/16	
pro out	perty you listed o	on Schedule A/B: Property(O	fficial Form 106A/B) as yo	ur sou		plying correct information. Using the s exempt. If more space is needed, fill s, write your name and case number (if	
spe app fun to a	ecific dollar ame plicable statuto ds—may be un	ount as exempt. Alternative ry limit. Some exemptions– limited in dollar amount. He lar amount and the value of	ly, you may claim the fu -such as those for healt owever, if you claim an e	II fair h aid: exemp	s, rights to receive certain benefits	g exempted up to the amount of any s, and tax-exempt retirement under a law that limits the exemption	
Pa	rt 1: Identify	the Property You Claim as	Exempt				
1.	Which set of	exemptions are you claimin	g? Check one only, even	if you	r spouse is filing with you.		
	You are clai	ming state and federal nonbar	nkruptcy exemptions. 11 l	U.S.C	. § 522(b)(3)		
	☐ You are clai	ming federal exemptions. 11	U.S.C. § 522(b)(2)				
2.	For any prope	erty you list on Schedule A/	B that you claim as exer	npt, f	ill in the information below.		
		n of the property and line on hat lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Table Line from Sche	adula A/P 6 1	\$20.00		\$20.00	N.Y. Civ. Prac. Law and Rules § 5205(a)(5)	
	Line nom Sche	edule A/D. U. I			100% of fair market value, up to any applicable statutory limit	g 3203(a)(3)	
	Bed	- 1.1. A/D C 3	\$200.00		\$200.00	N.Y. Civ. Prac. Law and Rules	
	Line from Sche	eaule A/B: 6.2			100% of fair market value, up to any applicable statutory limit	§ 5205(a)(5)	
	Night stant		\$50.00		\$50.00	N.Y. Civ. Prac. Law and Rules	
	Line from Sche	edule A/B. 0.3			100% of fair market value, up to any applicable statutory limit	§ 5205(a)(5)	
	Stove	adula A/P 6 A	\$50.00		\$50.00	N.Y. Civ. Prac. Law and Rules	
	LINE HOIR SCRE	Line from Schedule A/B. 6.4			100% of fair market value, up to any applicable statutory limit	§ 5205(a)(5)	
	Fridge		\$70.00		\$70.00	N.Y. Civ. Prac. Law and Rules	

Official Form 106C

100% of fair market value, up to any applicable statutory limit

§ 5205(a)(5)

Line from Schedule A/B: 6.5

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	, ,		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Tv (2) Line from Schedule A/B 7.1	\$300.00		\$300.00	N.Y. Civ. Prac. Law and Rules § 5205(a)(5)
			100% of fair market value, up to any applicable statutory limit	3 0 2 0 0 (1)(0)
Smart phone Line from Schedule A/B. 7.2	\$500.00		\$500.00	N.Y. Civ. Prac. Law and Rules § 5205(a)(5)
Elle Holli Golloddie 772. FIZ			100% of fair market value, up to any applicable statutory limit	3 0200(0)(0)
Cash Line from Schedule A/B 16.1	\$20.00		\$20.00	N.Y. Civ. Prac. Law and Rules § 5205(a)(9)
Line non Schedule Arb. 10.1			100% of fair market value, up to any applicable statutory limit	g 3203(a)(9)
CapitalOne Bank 2577 Line from Schedule A/B 17.1	\$10.53		\$10.53	N.Y. Civ. Prac. Law and Rules § 5205(a)(9)
Zino nom constato / VZ. TVI			100% of fair market value, up to any applicable statutory limit	3 0200(4)(6)
Life Insurance Line from Schedule A/B 31.1	\$25,000.00		\$25,000.00	N.Y. Ins. Law § 3212
Line non schedule A/L 31.1			100% of fair market value, up to any applicable statutory limit	
3. Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3 ■ No	B years after that for case	es filed	,	
☐ Yes. Did you acquire the property covere☐ No	a by the exemption within	11,∠1	o days before you filed this case?	

Yes

Fill in this infor	mation to identify your	case:			
Debtor 1	Patrice Cumming	js			
	First Name	Middle Name	Last Name)	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK, BROOKLYN	DIVISION	
Case number					
(if known)					☐ Check if t
					amended

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Official Form 106D

Fill in this inform	ation to identify your	case:					
Debtor 1	Patrice Cumming	ns					
	First Name	Middle N	ame	Last Name		 }	
Debtor 2	First Name	NAC-L-III - N		Last Name			
(Spouse if, filing)	First Name	Middle N	ame	Last Name			
United States Ban	kruptcy Court for the:	EASTERN I	DISTRICT OF NE	W YORK, BRO	OOKLYN DIVISIO	ON	
Case number							
(if known)			_				Check if this is an
						a	mended filing
Official Form	106E/F						
	/F: Creditors W	/ho Havo	Uneocuroc	l Claime			12/15
					2 O flit	s with NONPRIORITY clair	
D: Creditors Who Ha the Continuation Pa case number (if kno	ave Claims Secured by Pi ge to this page. If you ha wn).	roperty. If more ve no informati	space is needed, c on to report in a Pa	copy the Part yo	ou need, fill it out,	number the entries in the p of any additional pages	
	l of Your PRIORITY Un						
_ `	rs have priority unsecure	ed claims agains	t you?				
No. Go to Pa	art 2.						
☐ Yes.							
	of Your NONPRIORIT						
3. Do any creditor	rs have nonpriority unsec	cured claims ag	ainst you?				
☐ No. You hav	re nothing to report in this p	art. Submit this f	orm to the court with	n your other sche	edules.		
Yes.							
unsecured claim	n, list the creditor separately	y for each claim.	For each claim listed	d, identify what t	ype of claim it is. D	n. If a creditor has more than no not list claims already inc insecured claims fill out the	luded in Part 1. If more
							Total claim
4.1 0484130	08		Last 4 digits of ac	count number	4176		\$4,262.00
Nonpriority	Creditor's Name		\A/b = = = 4b = .deb	. 4 !10		_	
			When was the deb	ot incurred?			=
Number St	reet City State Zlp Code		As of the date you	ı file, the claim	is: Check all that a	apply	
Who incur	red the debt? Check one.						
Debtor	1 only		☐ Contingent				
☐ Debtor	2 only		☐ Unliquidated				
☐ Debtor	1 and Debtor 2 only		☐ Disputed				
	one of the debtors and and		Type of NONPRIO	RITY unsecure	d claim:		
	if this claim is for a com	munity	☐ Student loans				
debt Is the clair	m subject to offset?		□ Obligations arising report as priority class.		aration agreement	or divorce that you did not	
■ No	-		☐ Debts to pensio		ng plans, and other	similar debts	
☐ Yes			Other. Specify				

Debtor	1 Cummings, Patrice		Case number (if know)				
4.2	Amex	Last 4 digits of account number	5500	\$2,589.00			
	Nonpriority Creditor's Name Correspondence PO Box 981540 EI Paso, TX 79998-1540	When was the debt incurred?	2007-06				
•	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify					
	Belden Jewelers/Sterling Jewelers,						
4.3	Inc	Last 4 digits of account number		\$2,077.00			
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 1799	When was the debt incurred?	2007-06				
	Akron, OH 44309-1799 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	 ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 					
	■ No						
	Yes	Other. Specify					
4.4	Cap1/bstby	Last 4 digits of account number	3880	\$513.00			
	Nonpriority Creditor's Name Capital 1 Retail Srvs Attn Bankruptcy	When was the debt incurred?	2012-10				
	Salt Lake City, UT 84130						
	Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	\square Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify					

Debto	r 1 Cummings, Patrice		Case number (if know)				
4.5	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	1326	\$2,077.00			
	Attn: General Correspondence/Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0285	When was the debt incurred?	2007-10				
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify	g plans, and other similar debts				
4.6	Chase Card	Last 4 digits of account number	5254	\$428.00			
	Nonpriority Creditor's Name Attn: Correspondence PO Box 15298	When was the debt incurred?	2012-12				
	Wilmington, DE 19850-5298 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify					
4.7	Comenity Bank/Abarcrormbie Nonpriority Creditor's Name	Last 4 digits of account number	0978	\$1,659.00			
	PO Box 182125	When was the debt incurred?	2011-06				
	Columbus, OH 43218-2125 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	Check if this claim is for a community debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	a plane, and other similar debts				
	■ No	Debts to pension or profit-sharin	g pians, and other similar debts				
	Yes	Other. Specify					

Debto	Cummings, Patrice		Case number (f know)			
4.8	Comenity Bank/Anniesez Nonpriority Creditor's Name	Last 4 digits of account number	9174	\$102.00		
	Nonphonty Creditor's Name	When was the debt incurred?	2012-06			
	PO Box 182125 Columbus, OH 43218-2125 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured Student loans				
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other. Specify				
4.9	Comenity Bank/Express Nonpriority Creditor's Name	Last 4 digits of account number	8811	\$2,340.00		
	Attn: Bankruptcy PO Box 182125	When was the debt incurred?	2010-09			
	Columbus, OH 43218-2125 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:			
	☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts				
	debt Is the claim subject to offset?					
	■ No					
	☐Yes	Other. Specify				
4.10	Comenity Bank/Victoria Secret Nonpriority Creditor's Name	Last 4 digits of account number	1425	\$1,893.00		
	Attn: Bankruptcy PO Box 182125	When was the debt incurred?	2011-01			
	Number Street City State Zlp Code Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:			
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	.s sgrooment of divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other, Specify				

Debto	Cummings, Patrice		Case number (f know)				
4.11	Comenity Capital Bank/Hsn Nonpriority Creditor's Name	Last 4 digits of account number	5001	\$2,099.00			
	Nonphony Oreators Name	When was the debt incurred?	2010-04				
	PO Box 182125 Columbus, OH 43218-2125 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured Student loans	d claim: ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify					
4.12	Comenitycapital/mprcc Nonpriority Creditor's Name	Last 4 digits of account number	2075	\$178.00			
	•	When was the debt incurred?	2006-09				
	PO Box 182120 Columbus, OH 43218-2120 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	\square Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify					
4.13	Dsnb Bloomingdales Nonpriority Creditor's Name	Last 4 digits of account number	7824	\$1,929.00			
	Attn: Bankruptcy PO Box 8053 Mason, OH 45040-8053	When was the debt incurred?	2006-09				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only □ Contingent						
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not				
	■ No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debte				
	■ No □ Yes	<u> </u>	g p.a, and outer similar dobts				
	- 1 €3	Other. Specify					

Debtor	1 Cummings, Patrice		Case number (f know)			
4.14	First National Bank	Last 4 digits of account number	9353	\$1,489.00		
	Nonpriority Creditor's Name Attn: FNN Legal Dept 1620 Dodge St MSC CODE3290 Omaha, NE 68191	When was the debt incurred?	2011-09			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify				
4.15	Nordstrom Fsb Nonpriority Creditor's Name	Last 4 digits of account number	3851	\$756.00		
	Correspondence PO Box 6555	When was the debt incurred?	2014-05			
	Englewood, CO 80155-6555	As of the date you file, the claim is: Check all that apply				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i				
	Debtor 1 only	Пол				
	_ ′	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts				
	At least one of the debtors and another					
	☐ Check if this claim is for a community debt					
	Is the claim subject to offset?					
	■ No					
	Yes	Other. Specify				
4.16	Syncb/Home Design Furn	Last 4 digits of account number	2695	\$161.00		
	Nonpriority Creditor's Name	When was the debt incurred?	2016 02			
	C/o PO Box 965036	when was the debt incurred?	2016-02			
	Orlando, FL 32896-5036					
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify				

Debto	Cummings, Patrice		Case number (f know)			
4.17	Synchrony Bank/ Old Navy Nonpriority Creditor's Name	Last 4 digits of account number	9882	\$856.00		
	Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060	When was the debt incurred?	2014-08			
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	_				
4.18	Synchrony Bank/Amazon Nonpriority Creditor's Name	Last 4 digits of account number	1552	\$1,456.00		
	Attn: Bankruptcy PO Box 956060	When was the debt incurred?	2012-12			
	Orlando, FL 32896-5060 Number Street City State Zlp Code	As of the date you file, the claim	e. Chack all that apply			
	Who incurred the debt? Check one.		S. Olleck all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts				
	debt Is the claim subject to offset?					
	■ No					
	Yes	Other. Specify				
4.19	Synchrony Bank/American Eagle Nonpriority Creditor's Name	Last 4 digits of account number	0429	\$2,057.00		
	Attn: Bankruptcy PO Box 956060	When was the debt incurred?	2012-11			
	Number Street City State Zlp Code Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	· ·			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other, Specify				

Debto	Cummings, Patrice		Case number (f know)						
4.20	Synchrony Bank/Banana Republic Nonpriority Creditor's Name	Last 4 digits of account number	3251	\$1,054.00					
	Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060	When was the debt incurred?	2014-06						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply						
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not						
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts						
	Yes	Other. Specify							
4.21	Synchrony Bank/Care Credit Nonpriority Creditor's Name	Last 4 digits of account number	7574	\$3,224.00					
	Attn: Bankruptcy PO Box 956060	When was the debt incurred?	2012-03						
	Orlando, FL 32896-5060	A - of the data was file the plains	Charles Habert analy						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан that арру						
	Debtor 1 only								
		Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:							
	☐ At least one of the debtors and another	Student loans	<u>··</u>						
	☐ Check if this claim is for a community debt								
	Is the claim subject to offset?		☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts						
	Yes	Other. Specify							
4.22	Synchrony Bank/Gap	Last 4 digits of account number	8533	\$5,893.00					
	Nonpriority Creditor's Name	Who are some the shall be some 10							
	Attn: Bankruptcy PO Box 956060	When was the debt incurred?	2011-10						
	Orlando, FL 32896-5060								
	Number Street City State ZIp Code	As of the date you file, the claim	s: Check all that apply						
	Who incurred the debt? Check one.								
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims							
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts						
	Yes		5 i,						
	□ 162	Other. Specify							

Debtor	Cummings, Patrice		Case number (f know)				
4.23	Synchrony Bank/Lowes Nonpriority Creditor's Name	Last 4 digits of account number	0315	\$1,020.00			
	Attn: Bankruptcy PO Box 956060	When was the debt incurred?	2012-02				
	Orlando, FL 32896-5060 Number Street City State Zlp Code Who incurred the debt? Check one.	s: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify					
	Synchrony Bank/Pc Richards &		6750	¢4 c22 oo			
4.24	Sons Nonpriority Creditor's Name	Last 4 digits of account number	6750	\$1,623.00			
	Attn: Bankruptcy PO Box 956060	When was the debt incurred?	2014-07				
	Orlando, FL 32896-5060 Number Street City State Zlp Code	As of the date you file, the claim i					
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only						
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify					
4.25	Synchrony Bank/Qvc Nonpriority Creditor's Name	Last 4 digits of account number	5723	\$1,029.00			
	Attn: Bankruptcy PO Box 956060	When was the debt incurred?	2013-07				
	Orlando, FL 32896-5060 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharin					
	☐Yes	Other. Specify					
		====::,					

Debtor 1 Cummings, Patrice			Case number (f know)	
4.26	Synchrony Bank/Tjx Nonpriority Creditor's Name	Last 4 digits of account number	3526	\$2,479.00
	Attn: Bankruptcy PO Box 956060	When was the debt incurred?	2016-10	
	Orlando, FL 32896-5060 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.27	Target	Last 4 digits of account number	7404	\$448.00
	Nonpriority Creditor's Name C/O Financial & Retail Srvs Mailstopn BT	When was the debt incurred?	2006-07	
	PO Box 9475 Minneapolis, MN 55440-9475			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.28	Visa Dept Store National Bank/Macy's Nonpriority Creditor's Name	Last 4 digits of account number	2120	\$4,057.00
	Attn: Bankruptcy PO Box 8053	When was the debt incurred?	2003-03	
	Mason, OH 45040-8053 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Debtor 1 Cummings, Patrice Case number (f know)							
have more than one creditor for any of the debts notified for any debts in Parts 1 or 2, do not fill o		additional creditors here. If you do not have additional persons to be					
Name and Address	On which entry in Part 1 or Part 2 d						
Amex Dsnb	Line 4.2 of (Check one):	Part 1: Creditors with Priority Unsecured Claims					
PO Box 8218	Ason, OH 45040-8218 Last 4 digits of account number 5500						
	Last 4 digits of account number	5500					
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?					
Cap1/bstby	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
50 NW Point Blvd		■ Part 2: Creditors with Nonpriority Unsecured Claims					
Elk Grove Village, IL 60007-1032	Last 4 digits of account number	3880					
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?					
Capital One Bank USA N	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
15000 Capital One Dr		■ Part 2: Creditors with Nonpriority Unsecured Claims					
Richmond, VA 23238-1119	Last 4 digits of account number	1326					
Name and Address	On which entry in Part 1 or Part 2 d	lid you list the original creditor?					
Chase Card	Line 4.6 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims					
PO Box 15298		■ Part 2: Creditors with Nonpriority Unsecured Claims					
Wilmington, DE 19850-5298	Last 4 digits of account number	• •					
	Last 4 digits of account number	5254					
Name and Address Comenity Bank/Abcr&Fch	On which entry in Part 1 or Part 2 d Line 4.7 of (<i>Check one</i>):	· · _ ·					
PO Box 182789	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
Columbus, OH 43218-2789		■ Part 2: Creditors with Nonpriority Unsecured Claims					
,	Last 4 digits of account number	0978					
Name and Address	On which entry in Part 1 or Part 2 d	· <u> </u>					
Comenity Bank/Anniesez	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Claims					
995 W 122nd Ave Westminster, CO 80234-3417		■ Part 2: Creditors with Nonpriority Unsecured Claims					
Westimister, 00 00254-5417	Last 4 digits of account number	9174					
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?					
Comenity Bank/Express	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
PO Box 182789		■ Part 2: Creditors with Nonpriority Unsecured Claims					
Columbus, OH 43218-2789	Last 4 digits of account number	8811					
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?					
Comenity Bank/Vctrssec	Line 4.10 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims					
PO Box 182789	,	■ Part 2: Creditors with Nonpriority Unsecured Claims					
Columbus, OH 43218-2789	Last 4 digits of account number	·					
		1425					
Name and Address Comenity Capital/Hsn	On which entry in Part 1 or Part 2 d Line 4.11 of (<i>Check one</i>):	id you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims					
995 W 122nd Ave	Line 4.11 of (Check one).	Part 2: Creditors with Nonpriority Unsecured Claims					
Westminster, CO 80234-3417		Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number	5001					
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?					
Dsnb Bloom	Line 4.13 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims					
PO Box 8218		■ Part 2: Creditors with Nonpriority Unsecured Claims					
Mason, OH 45040-8218	Last 4 digits of account number	7824					
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?					
Dsnb Macys	Line 4.28 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
PO Box 8218		■ Part 2: Creditors with Nonpriority Unsecured Claims					
Mason, OH 45040-8218	Last 4 digits of account number						
	Last + aigns of account number	2120					

Debtor 1 Cummings, Patrice	Case number (f know)			
Name and Address Fnb Omaha PO Box 3412	On which entry in Part 1 or Part 2 d Line 4.14 of (<i>Check one</i>):	lid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims		
Omaha, NE 68103-0412	Last 4 digits of account number	9353		
Name and Address Kay Jewelers 375 Ghent Rd Fairlawn, OH 44333-4601	On which entry in Part 1 or Part 2 d Line 4.3 of (Check one): Last 4 digits of account number	lid you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims 2153		
Name and Address Nordstrom/td 13531 E Caley Ave Englewood, CO 80111-6504	On which entry in Part 1 or Part 2 d Line 4.15 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number	3851		
Name and Address Syncb/amazon PO Box 965015 Orlando, FL 32896-5015	On which entry in Part 1 or Part 2 d Line 4.18 of (<i>Check one</i>): Last 4 digits of account number	lid you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims 1552		
Name and Address Syncb/Amer Eagle DC PO Box 965005	On which entry in Part 1 or Part 2 d Line 4.19 of (<i>Check one</i>):	lid you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims		
Orlando, FL 32896-5005	Last 4 digits of account number	0429		
Name and Address Syncb/banana Rep PO Box 965005 Orlando El 33806 5005	On which entry in Part 1 or Part 2 d Line 4.20 of (<i>Check one</i>):	lid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims		
Orlando, FL 32896-5005	Last 4 digits of account number	3251		
Name and Address Syncb/Care Credit C/o PO Box 965036 Orlando, FL 32896-5036	On which entry in Part 1 or Part 2 d Line <u>4.21</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number	7574		
Name and Address Syncb/gapdc PO Box 965005 Orlando, FL 32896-5005	On which entry in Part 1 or Part 2 d Line 4.22 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number	8533		
Name and Address Syncb/lowes PO Box 956005 Orlando, FL 32896	On which entry in Part 1 or Part 2 d Line 4.23 of (Check one): Last 4 digits of account number	lid you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims 0315		
Name and Address	On which entry in Part 1 or Part 2 d			
Syncb/Old Navy PO Box 965005 Orlando, FL 32896-5005	Line <u>4.17</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims		
·	Last 4 digits of account number	9882		
Name and Address Syncb/Pc Richard PO Box 965036 Orlando, FL 32896-5036	On which entry in Part 1 or Part 2 d Line 4.24 of (<i>Check one):</i>	lid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number	6750		
Name and Address	On which entry in Part 1 or Part 2 d	lid you list the original creditor?		

Debtor 1 Cummings, Patrice		Case number (f know)				
Syncb/qvc PO Box 965018 Orlando, FL 32896-5018	Line 4.25 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account number	5723				
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?				
Syncb/tjx Cos Dc	Line 4.26 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 965005 Orlando, FL 32896-5005		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Onando, i E 32030-3003	Last 4 digits of account number	3526				
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
Td Bank USA/Targetcred	Line 4.27 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 673 Minneapolis, MN 55440-0673		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Willingapons, Mix 33440-0073	Last 4 digits of account number	7404				
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?				
Unknown Plaintiff	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims 4176				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		
	- 3	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 49,748.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 49,748.00

Fill in this information to identify your case:						
Patrice Cummings	5					
First Name	Middle Name	Last Name	-)			
First Name	Middle Name	Last Name	<u> </u>			
uptcy Court for the:	EASTERN DISTRICT OF	F NEW YORK, BROOKLYN DIVISION	_			
			☐ Check if this is ar			
			amended filing			
	First Name	First Name Middle Name	First Name Middle Name Last Name First Name Middle Name Last Name			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with Name, Number	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3	o.i.y		<u> </u>		
	Name				_
	Number	Street			_
	-0.1		01.1	710.0	_
2.4	City		State	ZIP Code	
2.7	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					_
	Name				
	Number:	Ctroot			_
	Number	Street			
	City		State	ZIP Code	-

Official Form 106G

Fill in this i	information to identify you	r case:			
Debtor 1	Patrice Cummin	ngs Middle Name	Last Name		
Debtor 2	First Name	Middle Name	Last Name	ĺ	
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	EASTERN DISTRICT OF	F NEW YORK, BROOK	LYN DIVISION	
Case numb	per				
(if known)					Check if this is an amended filing
Official	Form 106H				
	ule H: Your Co	debtors			12/15
Julieu	ule II. Toul oo				12/15
1. Do y	er (if known). Answer every	r question. f you are filing a joint case, do	not list either spouse as	s a codebtor.	
■ No □ Yes					
		ou lived in a community pro a, New Mexico, Puerto Rico,			states and territories include Arizona,
■ No.	Go to line 3.				
☐ Yes.	Did your spouse, former spo	ouse, or legal equivalent live wi	th you at the time?		
line 2 a	again as a codebtor only if Schedule E/F (Official Forr	that person is a guarantor o	or cosigner. Make sure	you have listed the c	with you. List the person shown in reditor on Schedule D (Official Forn le E/F, or Schedule G to fill out
	Column 1: Your codebtor lame, Number, Street, City, State and	d ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D. lin	e
	Name			_ ☐ Schedule E/F,	·
				☐ Schedule G, lir	
	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, lin	e
	Name			□ Schedule E/F,	
				☐ Schedule G, lin	ne
	Number Street	State	ZIP Code	_	
	- · · ,		0000		

Official Form 106H Software Copyright (c) 1996-2017 CIN Group - www.cincompass.com Schedule H: Your Codebtors Page 1 of 1

Fill	in this information to	identify your cas	se:								
Del	otor 1	Patrice Cumi	mings			_					
	otor 2 buse, if filing)										
Uni	ted States Bankrupt	ccy Court for the:	EASTERN DISTRICT DIVISION	OF NEW YORK, B	ROOKLYN	_					
	se number nown)						□ Ar		ed filing ent show	ving postpetitior	n chapter 13
O	fficial Form	106I						M / DD/ \		nowing date.	
S	chedule I: `	Your Inco	me				1411	WI / DD/			12/15
sup spo atta Par	plying correct inforuse. If you are sepach a separate shee	rmation. If you a arated and your t to this form. On Employment	ole. If two married peop re married and not filing spouse is not filing with the top of any additio	g jointly, and your h you, do not inclu	spouse is ide informa	livin ation	g with yo	ou, inclu- our spou	de infor se. If m	mation about ore space is n	your eeded,
1.	Fill in your emplo information.	pyment		Debtor 1				Debtor 2	2 or non	n-filing spouse	1
	If you have more th		Employment status	■ Employed				☐ Empl	oyed		
	attach a separate properties information about employers.	•	Occupation	☐ Not employed				□ Not e	mployed	d	
	Include part-time, self-employed world		Employer's name	L & M Bus Co	rp						
	Occupation may in homemaker, if it a		Employer's address	3167 Atlantic A		13					
			How long employed th	nere?				_			
Par	rt 2: Give Det	ails About Mont	hly Income								
	mate monthly inco		e you file this form. If yo	ou have nothing to re	eport for any	y line	, write \$0	in the sp	ace. Incl	lude your non-fi	ling spouse
	u or your non-filing s ce, attach a separate		than one employer, comb	oine the information t	for all emplo	oyers	for that p	erson on	the lines	s below. If you r	need more
							For Deb	tor 1		Debtor 2 or -filing spouse	
2.			, and commissions (below and commissions), and commissions (below and commissions).		2.	\$.	1,9	917.73	\$	N/A	<u>\</u>
3.	Estimate and list	monthly overtin	ne pay.		3.	+\$.		0.00	+\$	N/A	<u>\</u>
4.	Calculate gross I	ncome. Add line	2 + line 3.		4.	\$	1,91	7.73	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Cummings, Patrice	_	C	ase number (if kr	nown)			
	Cor	by line 4 here	4.	1	For Debtor 1	7.73		ebtor 2 or ling spouse N/A	
5.	·	all payroll deductions:							<u>-</u>
J.	5a.	Tax, Medicare, and Social Security deductions	5a.	. :	302	2.76	\$	N/A	A
	5b.	Mandatory contributions for retirement plans	5b.	. ;	<u> </u>	0.00	\$	N/A	\
	5c.	Voluntary contributions for retirement plans	5c.	. ;	<u> </u>	0.00	\$	N/A	\
	5d.	Required repayments of retirement fund loans	5d.	. :	<u> </u>	0.00	\$	N/A	\
	5e.	Insurance	5e.	. :	<u> </u>	0.00	\$	N/A	\
	5f.	Domestic support obligations	5f.	,		0.00	\$	N/A	_
	5g.	Union dues	5g.	. :	38	3.78	\$	N/A	\
	5h.	Other deductions. Specify: NY SDI	5h.	.+ 3		2.60	+ \$	N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	344	1.14	\$	N/A	<u> </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,573	3.59	\$	N/A	<u> </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.			0.00	\$	N/A	_
	8b.	Interest and dividends	8b.		·	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.				0.00	\$	N/A	_
	8d.	Unemployment compensation	8d.	. :	<u> </u>	0.00	\$	N/A	-
	8e.	Social Security	8e.	. ;		0.00	\$	N/A	\
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	;	-	0.00	\$	N/A	_ \
	8g.	Pension or retirement income	— 8g.	. :		0.00	\$	N/A	\
	8h.	Other monthly income. Specify:	8h.	.+ 3	\$ <u>C</u>	0.00	+ \$	N/A	<u></u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0	0.00	\$	N/	'A
40	0-1	aulata manthhuinnama. Add Era 7 u Era 0	40 [Φ	4 570 50			a	4 570 50
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	^Ф —	1,573.59	+ 5		N/A = \$ _	1,573.59
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your dear friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not available.	epende	,	,	•		e <i>J.</i> 11. + \$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The resulte that amount on the Summary of Schedules and Statistical Summary of Certain						12. \$	1,573.59
13.	Do	you expect an increase or decrease within the year after you file this form	?					Combi	ined Ily income
		No.							
		Yes. Explain:							

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:				
Deb	tor 1 Patrice Cummings		Check	if this is:	
	tor 2 puse, if filing)			An amended filing A supplement show expenses as of the	ing postpetition chapter 13 following date:
` `	ed States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YOU BROOKLYN DIVISION	RK,	MM / DD / YYYY		
1	e number nown)				
	fficial Form 106J chedule J: Your Expenses				12/15
Be info	as complete and accurate as possible. If two married people are fi ormation. If more space is needed, attach another sheet to this for known). Answer every question.				supplying correct
Par 1.	Describe Your Household Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses fo	r Separate Househ	oldof Debtor 2	2.	
2.	Do you have dependents?				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the dependents names.	Son			■ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				☐ Yes
Est exp	Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless you enses as of a date after the bankruptcy is filed. If this is a suppler licable date.				
valı	ude expenses paid for with non-cash government assistance if you up of such assistance and have included it on Schedule I: Your Inficial Form 1061.)			Your expo	enses
4.	The rental or home ownership expenses for your residence. Incl payments and any rent for the ground or lot.	ude first mortgage	4. \$		1,272.19
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
F	4d. Homeowner's association or condominium dues	oguity loca-	4d. \$		0.00
5.	Additional mortgage payments for your residence, such as home	e equity loans	5. \$		0.00

Del	otor 1	Cummings, Patrice	Case number (if known)	
6.	Utilit	ies:		
	6a.	Electricity, heat, natural gas	6a. \$	200.00
	6b.	Water, sewer, garbage collection	6b. \$	0.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	280.00
	6d.	Other. Specify:	6d. \$	0.00
7.	Food	d and housekeeping supplies	7. \$	350.00
8.	Child	dcare and children's education costs	8. \$	0.00
9.	Clotl	hing, laundry, and dry cleaning	9. \$	20.00
10.	Pers	onal care products and services	10. \$	50.00
11.	Medi	ical and dental expenses	11. \$	0.00
12.	Tran	sportation. Include gas, maintenance, bus or train fare.		
		ot include car payments.	12. \$	0.00
		rtainment, clubs, recreation, newspapers, magazines, and books		0.00
14.	Char	itable contributions and religious donations	14. \$	50.00
15.		rance.		
		ot include insurance deducted from your pay or included in lines 4 or Life insurance		0.00
			15a. \$ 15b. \$	0.00
		Health insurance		0.00
		Vehicle insurance	15c. \$	0.00
4.0		Other insurance. Specify:	15d. \$	0.00
	Spec	•	r 20. 16. \$	0.00
17.		Illment or lease payments: Car payments for Vehicle 1	17a. \$	0.00
		Car payments for Vehicle 2	17b. \$	0.00
			·	0.00
		Other. Specify:	17c. \$	0.00
40		Other. Specify:	17d. \$	0.00
18.		r payments of alimony, maintenance, and support that you did no acted from your pay on line 5, Schedule I, Your Income (Official F		0.00
19.		er payments you make to support others who do not live with you	<u></u>	0.00
	Spec		19.	
20.	•	r real property expenses not included in lines 4 or 5 of this form	or on Schedule I: Your Income.	
	20a.	Mortgages on other property	20a. \$	0.00
	20b.	Real estate taxes	20b. \$	0.00
	20c.	Property, homeowner's, or renter's insurance	20c. \$	0.00
	20d.	Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e.	Homeowner's association or condominium dues	20e. \$	0.00
21.	Othe	r: Specify: Pet Care	21. +\$	45.00
22	Calc	ulate your monthly expenses		
		Add lines 4 through 21.	\$ 2	,267.19
		Copy line 22 (monthly expenses for Debtor 2), if any, from Official Fo		.,207.19
				1007.40
	22C.	Add line 22a and 22b. The result is your monthly expenses.	[*]	2,267.19
23.	Calc	ulate your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	1,573.59
	23b.	Copy your monthly expenses from line 22c above.	23b\$	2,267.19
	23c.	Subtract your monthly expenses from your monthly income.		
		The result is your monthly net income.	23c. \$	-693.60
24.	For exmodif			se because of a
	☐ Y	es. Explain here:		

Fill in this infor	mation to identify your	case:					
Debtor 1	Patrice Cumming	qs					
	First Name	Middle Name	Las	st Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Las	st Name			
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YOR	RK, BROOKLYN DIVISI	ON		
Case number							
(if known)						☐ Check if this is an	
						amended filing	
Official For	m 106Dec						
Declara	tion About a	an Individual	Debt	or's Sched	عماري	12/	4 E
Deolara	tion About t	an marviduai	DCDL	or 3 donica	aics	12/	13
f two married po	eople are filing together	, both are equally respons	sible for su	polving correct inform	nation.		
•				, 0			
						nent, concealing property, or	
			uptcy case	can result in fines up	to \$250,000	, or imprisonment for up to 20	
ears, or both. 1	18 U.S.C. §§ 152, 1341, 1	519, and 3571.					
Sig	ın Below						
Did you pa	ay or agree to pay some	one who is NOT an attorn	ey to help	ou fill out bankruptcy	forms?		
■ No							
☐ Yes.	Name of person					kruptcy Petition Preparer's Notice,	
					Declaration	, and Signature (Official Form 119)
•		that I have read the sumn	nary and sc	hedules filed with this	declaration	and	
that they ar	re true and correct.						
X /s/ Pat	trice Cummings		Х				
Patric	e Cummings			Signature of Debtor 2			_
Signatu	ure of Debtor 1						
Date	March 10, 2017			Date			
	a. 511 10, 2011						

Fill in	this inform	ation to identify your	case:			
Debto	or 1	Patrice Cummin	as			
		First Name	Middle Name	Last Name		
Debto (Spous	or 2 e if, filing)	First Name	Middle Name	Last Name		
		Juniotas Casut for the			MARION	
Unite	d States Ban	kruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK, BROOKLYN D	DIVISION	
Case (if know	number				_	Check if this is an mended filing
	cial For tement		Affairs for Individ	luals Filing for B	ankruptcy	4/1
nform if kno	nation. If mo own). Answe	ore space is needed, a r every question.	attach a separate sheet to th	nis form. On the top of any	qually responsible for supply additional pages, write your i	ring correct name and case numbe
		etails About Your Ma current marital status	rital Status and Where You	Lived Before		
. •	viiat is your	Current maritar status	5 :			
	Married Not marr	ried				
2. D	Ouring the la	st 3 years, have you l	ived anywhere other than v	here you live now?		
	■ No □ Yes. List	all of the places you liv	ed in the last 3 years. Do not i	nclude where you live now.		
ı	Debtor 1 Pri	or Address:	Dates Debtor 1 there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
					ty property state or territory?	
	No					
	Yes. Mal	ke sure you fill out <i>Sch</i> e	edule H: Your Codebtors (Offic	cial Form 106H).		
Part 2	2 Explain	n the Sources of Your	Income			
F	ill in the total	l amount of income you	ployment or from operating a received from all jobs and a ave income that you receive to	Il businesses, including part-		ar years?
	□ No					
	_	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	ast calendar uarv 1 to Dec	year: cember 31, 2016)	■ Wages, commissions,	\$15,558.00	☐ Wages, commissions,	and oxoldololoj
,	,		bonuses, tips		bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

De	ebtor 1 Cu	ummings, F	Patrice			Cas	se number (if known)		
				Debtor 1			Debtor 2		
				Sources of incom Check all that apply	y. (befo	ss income ore deductions and usions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		dar year befo December 3		■ Wages, commis bonuses, tips	ssions,	\$15,695.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a bus	siness		☐ Operating a	business	
5.	Include inc other publ you are fili	come regardle ic benefit payr ng a joint case	ess of wheth ments; pens e and you h		ole. Examples of terest; dividends; ceived together, l	other income are alim money collected from ist it only once under	n lawsuits; royalties; Debtor 1.		rity, unemployment, and g and lottery winnings. If
	■ No □ Yes.	Fill in the det	ails.						
				Debtor 1			Debtor 2		
				Sources of income Describe below.	eacl (befo	ss income from n source ore deductions and usions)	Sources of inc Describe below.		Gross income (before deductions and exclusions)
i - a	·	Debtor 1's o	or Debtor 2 otor 1 nor I	Made Before You F 's debts primarily co Debtor 2 has primaril personal, family, or ho	nsumer debts? y consumer del	bts. Consumer debts	are defined in 11 U	.S.C. § 101(8	s) as "incurred by an
		During the 9 No.	00 days befo	ore you filed for bankru 7.	ptcy, did you pay	any creditor a total of	\$6,425* or more?		
		☐ Yes	creditor. D	o not include paymen to an attorney for this b	ts for domestic s ankruptcy case.	upport obligations, s	uch as child suppor	t and alimony	tal amount you paid that y. Also, do not include
	■ Yes.			t on 4/01/19 and every or both have primaril			arter the date of ad	justment.	
		During the 9	00 days befo	ore you filed for bankru	ptcy, did you pay	any creditor a total of	\$600 or more?		
		■ No. □ Yes		each creditor to whom for domestic support o					ditor. Do not include nents to an attorney for
	Creditor	's Name and	Address	Dates o	f payment	Total amount	Amount you still owe	Was this p	payment for
7.	Insiders in which you business y	clude your rel are an officer	atives; any , director, p s a sole prop	r bankruptcy, did you general partners; relativerson in control, or own prietor. 11 U.S.C. § 10°	ves of any genera ner of 20% or mo	ent on a debt you oval partners; partnershire of their voting secu	ved anyone who wips of which you are irities; and any man	a general pa aging agent, i	rtner; corporations of ncluding one for a
	Insider's	Name and A	ddress	Dates o	of payment	Total amount paid	Amount you still owe	Reason fo	r this payment

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an

Debtor 1		Cummings, Patrice	Case number (if known)				
	insid Includ	ler? de payments on debts guaranteed or cosign	ned by an insider.				
	_	No Yes. List all payments to an insider					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe		r this payment ditor's name
Pa	rt 4:	Identify Legal Actions, Repossessions	s, and Foreclosures				
9.	List a	in 1 year before you filed for bankruptc all such matters, including personal injury ca contract disputes.					
		No Yes. Fill in the details.					
		e title e number	Nature of the case	Court or agency		Status of t	he case
 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seize Check all that apply and fill in the details below. No. Go to line 11. 					seized, or levied?		
		Yes. Fill in the information below.					
	Cred	ditor Name and Address	Describe the Property Explain what happened		Date		Value of the property
11.	acco	in 90 days before you filed for bankrupt unts or refuse to make a payment beca No Yes. Fill in the details. ditor Name and Address				set off any a	mounts from your Amount
	Crec	uitor Name and Address	Describe the action the	Creditor took	take		Amount
12.		in 1 year before you filed for bankrupto t-appointed receiver, a custodian, or an		rty in the possession	on of an assignee	for the benef	it of creditors, a
	_	No					
0.0		Yes					
		List Certain Gifts and Contributions in 2 years before you filed for bankrupt	cy did you give any gifts	with a total value o	of more than \$600	ner nerson?	
10.		No Yes. Fill in the details for each gift.	oy, and you give any gires	Will a total value o	or more than you	, per person.	
	Gifts	s with a total value of more than \$600 person	Per Describe the gifts		Date the ç	s you gave gifts	Value
		son to Whom You Gave the Gift and lress:					
14.		in 2 years before you filed for bankruptons No Yes. Fill in the details for each gift or contri		or contributions w	rith a total value o	of more than S	6600 to any charity?
	Gifts mor Cha	s or contributions to charities that tota te than \$600 rrity's Name Iress (Number, Street, City, State and ZIP Code)		ı contributed		s you ributed	Value
		_					

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Case 1-17-41151-cec Doc 1 Filed 03/10/17 Entered 03/10/17 12:17:36

Debtor 1 Cummings, Patrice				Case numbe	er (if known)	
	or gambling?					
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the lo the amount that insurance has paid. L ace claims on line 33 of Schedule A/B: H	ist pending	Date of your loss	Value of property lost
Par	rt 7: List Certain Payments or Transfer	s				
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition pr	preparing	g a bankruptcy petition?			to anyone you
	□ No■ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	′ ou	Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
	Shipkevich Law 65 Broadway # 508 New York, NY 10006-2538		Legal services \$995			\$995.00
17.	Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that	ditors or	to make payments to your creditors		or transfer any property	/ to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankr transferred in the ordinary course of you include both outright transfers and transfers gifts and transfers that you have already listed. No	ur busine made as	ess or financial affairs? security (such as the granting of a sec		• •	
	Yes. Fill in the details. Person Who Received Transfer		Description and value of		e any property or	Date transfer was
	Address Person's relationship to you		property transferred		ts received or debts exchange	made
19.				lf-settled tr	ust or similar device of	which you are a
	Name of trust		Description and value of the prope	rty transfer	red	Date Transfer was made

Deb	otor 1	Cummings, Patrice			Case num	ber (if known)		
	-							
Par	t 8:	List of Certain Financial Accounts, Inst	ruments, S	Safe Deposit	Boxes, and Stora	age Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa No Yes. Fill in the details.		other fina	ncial accoun	ts; certificates of			
	Name	e of Financial Institution and PSS (Number, Street, City, State and ZIP	Last 4 dig account r		Type of accou instrument	nt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	cash, o	u now have, or did you have within 1 ye or other valuables? o	ear before	you filed for	bankruptcy, any	safe depo	osit box or other deposito	ory for securities,
	□ Y	es. Fill in the details.						
	Address (Number, Street, City, State and ZIP Code)			else had acc ress (Number, S IP Code)		Describe	the contents	Do you still have it?
22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details.				?				
		e of Storage Facility ⊋SS (Number, Street, City, State and ZIP Code)	to it?	else has or h ? ress (Number, S IP Code)		Describe	the contents	Do you still have it?
Par	t 9:	Identify Property You Hold or Control f	or Someo	ne Else				
23.	Do you some o		neone else	owns? Inclu	de any property	you borro	owed from, are storing fo	, or hold in trust for
	□ Y	es. Fill in the details.						
		er's Name ess (Number, Street, City, State and ZIP Code)		re is the prop ber, Street, City, S		Describe the property		Value
Par	t 10:	Give Details About Environmental Info	mation					
For	the pur	pose of Part 10, the following definition	ns apply:					
	toxic s	onmental law means any federal, state, substances, wastes, or material into the illing the cleanup of these substances,	air, land,	soil, surface				
		eans any location, facility, or property perate, or utilize it, including disposal		l under any e	nvironmental lav	v, whethe	you now own, operate, o	or utilize it or used to
		dous material <mark>means anything an envir</mark> al, pollutant, contaminant, or similar te		law defines a	s a hazardous w	aste, haza	rdous substance, toxic s	ubstance, hazardous
Rep	ort all n	notices, releases, and proceedings that	you know	about, regar	dless of when th	ey occurr	ed.	
24.	Has ar	ny governmental unit notified you that	you may b	e liable or po	tentially liable u	nder or in	violation of an environm	ental law?
	■ N	o es. Fill in the details.						
		of site	Gove	ernmental un	it	Envir	onmental law, if you	Date of notice
		SSS (Number, Street, City, State and ZIP Code)		ress (Number, S	treet, City, State and	know		Date of Hotice

Del	otor '	Cummings, Patrice		Case number	er (if known)					
25.	Hav	re you notified any governmental unit of	any release of hazardous material?							
		No								
		Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environ know it	mental law, if you	Date of notice				
26.	Hav	re you been a party in any judicial or adn	ministrative proceeding under any enviro	nmental law	? Include settlements ar	nd orders.				
	_	No								
		Yes. Fill in the details.								
	Ca	se Title	Court or agency	Nature of th	e case	Status of the				
	Ca	se Number	Name Address (Number, Street, City, State and ZIP Code)			case				
Pai	t 11:	Give Details About Your Business or	Connections to Any Business							
27.	Wit	hin 4 years before you filed for bankrupt	cy, did you own a business or have any	of the follow	ving connections to any	business?				
		 □ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) 								
		☐ A partner in a partnership								
		☐ An officer, director, or managing executive of a corporation								
		☐ An owner of at least 5% of the voting	•							
	_									
	_	No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business.								
	□ B.	Yes. Check all that apply above and fill siness Name		Employ	yer Identification numbe	•				
	Ad	dress	ess		include Social Security					
	(Nu	mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates I	business existed					
28.		hin 2 years before you filed for bankrupt citutions, creditors, or other parties.	ccy, did you give a financial statement to	anyone abo	ut your business? Includ	de all financial				
	_	Na								
		No Yes. Fill in the details below.								
	Na	me	Date Issued							
		dress mber, Street, City, State and ZIP Code)								
Pai	t 12	Sign Below								
true ban 18 L	and krup J.S.C	correct. I understand that making a false	ancial Affairs and any attachments, and e statement, concealing property, or obta 00, or imprisonment for up to 20 years, o	aining mone						
Pa	trice	Cummings ire of Debtor 1	Signature of Debtor 2							
Dat		March 10, 2017	Date							
	-	·	_			١٥.				
Dia ■ N		attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Fili	ng for Banki	Tupicy (Official Form 107)?				
□ Y										
Did ■ N	-	pay or agree to pay someone who is not	an attorney to help you fill out bankrupt	cy forms?						
_		Name of Person Attach the Bankru	ptcy Petition Preparer's Notice, Declaration,	and Signatur	e (Official Form 119).					
Offic	ial Fo	rm 107 Staten	nent of Financial Affairs for Individuals Filing	for Bankrupto	; y	page 6				

Fill in this informa	ation to identify your o	case:		
Debtor 1	Patrice Cumming	IS		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bank	kruptcy Court for the:	FASTERN DISTR	ICT OF NEW YORK, BROOKLYN DIVISION	
Officed States Barn	kruptcy Court for the.	<u> </u>	IOT OF NEW TORK, BROOKETH BIVIOLON	
Case number				☐ Check if this is an amended filing
Official For	m 108			
Statemen	t of Intentio	n for Indiv	riduals Filing Under Chapt	ter 7 12/15
If you are an indivi	idual filing under chap	oter 7. vou must fill	out this form if:	
	claims secured by you			
You must file this	er is earlier, unless the	thin 30 days after y	t expired. ou file your bankruptcy petition or by the date set time for cause. You must also send copies to the	
	ple are filing together the form.	in a joint case, both	n are equally responsible for supplying correct inf	ormation. Both debtors must sign
	d accurate as possibl ur name and case num		needed, attach a separate sheet to this form. On th	e top of any additional pages,
Part 1: List You	ur Creditors Who Have	e Secured Claims		
For any creditor information below		rt 1 of Schedule D:	Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
	ditor and the property th	hat is collateral	What do you intend to do with the property that	Did you claim the property
			secures a debt?	as exempt on Schedule C?
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	₂ □ Yes
Description of			☐ Retain the property and enter into a Reaffirmation Agreement.	n Lies
property			☐ Retain the property and [explain]:	
securing debt:				<u> </u>
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
Description of			☐ Retain the property and enter into a Reaffirmation	n ☐ Yes
Description of property			Agreement. ☐ Retain the property and [explain]:	
securing debt:			Trotain the property and [explain].	
Creditor's			T o manufacture in	П N.
name:			☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
			☐ Retain the property and redeem it. ☐ Retain the property and enter into a <i>Reaffirmation</i>	n □ Yes
Description of			Agreement.	
property			☐ Retain the property and [explain]:	
securing debt:				<u> </u>

Official Form 108

Creditor's

☐ Surrender the property.

☐ No

Debtor 1 Cummings, Patrice	Case number (if known)	
name: Description of property securing debt:	 □ Retain the property and redeem it. □ Retain the property and enter into a <i>Reaffirmation Agreement</i>. □ Retain the property and [explain]: 	☐ Yes
the information below. Do not list real estate lease	Leases ou listed in Schedule G: Executory Contracts and Unexpired Les. Unexpired leases are leases that are still in effect; the lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).	
Describe your unexpired personal property lease	es	Will the lease be assumed?
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
	icated my intention about any property of my estate that secu	res a debt and any personal
X /s/ Patrice Cummings Patrice Cummings Signature of Debtor 1	XSignature of Debtor 2	
Date March 10, 2017	Date	

Official Form 108

Case 1-17-41151-cec Doc 1 Filed 03/10/17 Entered 03/10/17 12:17:36

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York, Brooklyn Division

In r		ict of New Tork, Brookly	Case No.		
	- Cumminge, Fullion	Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR I	DEBTOR	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filir be rendered on behalf of the debtor(s) in contemplation of	ng of the petition in bankruptcy	, or agreed to be pai	d to me, for services rendered	or to
	For legal services, I have agreed to accept		\$	995.00	
	Prior to the filing of this statement I have received.		\$	995.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp firm.	pensation with any other person	unless they are men	mbers and associates of my la	w
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the narrows.				1. A
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspec	ts of the bankruptcy	case, including:	
	a. Analysis of the debtor's financial situation, and rendeb. Preparation and filing of any petition, schedules, statec. Representation of the debtor at the meeting of credited. [Other provisions as needed]	ement of affairs and plan which	n may be required;		
6.	By agreement with the debtor(s), the above-disclosed fee	e does not include the followin	g service:		
		CERTIFICATION			
	I certify that the foregoing is a complete statement of an bankruptcy proceeding.	y agreement or arrangement fo	r payment to me for	representation of the debtor(s	i) in
	March 10, 2017	/s/ Irene Costello			
1	Date (Irene Costello Signature of Attorne Shipkevich Law	y		
		65 Broadway # 50 New York, NY 100			
		icostello@shipke Name of law firm	vich.com		

Case 1-17-41151-cec Doc 1 Filed 03/10/17 Entered 03/10/17 12:17:36

United States Bankruptcy Court Eastern District of New York, Brooklyn Division

IN RE:		Case No.		
Cummings, Patrice		Chapter 7		
	Debtor(s)			
	VERIFICATION OF CRED	ITOR MATRIX		
The above named debtor(s) or att correct to the best of their knowle		fy that the attached matrix (list of creditors) is true and		
Date: March 10, 2017	/s/ Patrice Cummings Debtor			
	Joint Debtor			
	/s/ Irene Costello Attorney for Debtor			

Amex Correspondence PO Box 981540 El Paso, TX 79998-1540

Amex Dsnb PO Box 8218 Mason, OH 45040-8218

Belden Jewelers/Sterling Jewelers, Inc Attn: Bankruptcy PO Box 1799 Akron, OH 44309-1799

Cap1/bstby
Capital
1 Retail Srvs Attn Bankruptcy
Salt Lake City, UT 84130

Cap1/bstby
50 NW Point Blvd
Elk Grove Village, IL 60007-1032

Capital One Attn: General Correspondence/Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0285 Capital One Bank USA N 15000 Capital One Dr Richmond, VA 23238-1119

Chase Card PO Box 15298 Wilmington, DE 19850-5298

Chase Card
Attn: Correspondence
PO Box 15298
Wilmington, DE 19850-5298

Comenity Bank/Abarcrormbie PO Box 182125 Columbus, OH 43218-2125

Comenity Bank/Abcr&Fch PO Box 182789 Columbus, OH 43218-2789

Comenity Bank/Anniesez 995 W 122nd Ave Westminster, CO 80234-3417

Comenity Bank/Anniesez PO Box 182125 Columbus, OH 43218-2125 Comenity Bank/Express Attn: Bankruptcy PO Box 182125 Columbus, OH 43218-2125

Comenity Bank/Express PO Box 182789 Columbus, OH 43218-2789

Comenity Bank/Vctrssec PO Box 182789 Columbus, OH 43218-2789

Comenity Bank/Victoria Secret Attn: Bankruptcy PO Box 182125 Columbus, OH 43218-2125

Comenity Capital Bank/Hsn PO Box 182125 Columbus, OH 43218-2125

Comenity Capital/Hsn 995 W 122nd Ave Westminster, CO 80234-3417

Comenitycapital/mprcc PO Box 182120 Columbus, OH 43218-2120 Dsnb Bloom PO Box 8218 Mason, OH 45040-8218

Dsnb Bloomingdales Attn: Bankruptcy PO Box 8053 Mason, OH 45040-8053

Dsnb Macys PO Box 8218 Mason, OH 45040-8218

Equifax PO Box 740256 Atlanta, GA 30374-0256

Experian PO Box 4500 Allen, TX 75013-1311

First National Bank Attn: FNN Legal Dept 1620 Dodge St MSC CODE3290 Omaha, NE 68191

Fnb Omaha PO Box 3412 Omaha, NE 68103-0412 Kay Jewelers 375 Ghent Rd Fairlawn, OH 44333-4601

Nordstrom Fsb Correspondence PO Box 6555 Englewood, CO 80155-6555

Nordstrom/td 13531 E Caley Ave Englewood, CO 80111-6504

Syncb/amazon PO Box 965015 Orlando, FL 32896-5015

Syncb/Amer Eagle DC PO Box 965005 Orlando, FL 32896-5005

Syncb/banana Rep PO Box 965005 Orlando, FL 32896-5005

Syncb/Care Credit C/o PO Box 965036 Orlando, FL 32896-5036 Syncb/gapdc PO Box 965005 Orlando, FL 32896-5005

Syncb/Home Design Furn C/o PO Box 965036 Orlando, FL 32896-5036

Syncb/lowes PO Box 956005 Orlando, FL 32896

Syncb/Old Navy PO Box 965005 Orlando, FL 32896-5005

Syncb/Pc Richard PO Box 965036 Orlando, FL 32896-5036

Syncb/qvc PO Box 965018 Orlando, FL 32896-5018

Syncb/tjx Cos Dc PO Box 965005 Orlando, FL 32896-5005 Synchrony Bank/ Old Navy Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060

Synchrony Bank/Amazon Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060

Synchrony Bank/American Eagle Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060

Synchrony Bank/Banana Republic Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060

Synchrony Bank/Care Credit Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060

Synchrony Bank/Gap Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060 Synchrony Bank/Lowes Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060

Synchrony Bank/Pc Richards & Sons Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060

Synchrony Bank/Qvc Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060

Synchrony Bank/Tjx Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060

Target C/O Financial & Retail Srvs Mailstopn BT PO Box 9475 Minneapolis, MN 55440-9475

Td Bank USA/Targetcred PO Box 673 Minneapolis, MN 55440-0673

Transunion
TransUnion LLC Consumer Dispute Center
PO Box 2000
Chester, PA 19022-2000

Visa Dept Store National Bank/Macy's Attn: Bankruptcy PO Box 8053 Mason, OH 45040-8053

Fill in this info	ormation to identify your case:		Ch	ock on	hox only as di	rected in this form and	d in Form
Debtor 1	Patrice Cummings			2A-1Su		necteu in this form and	IIIIFOIIII
Debtor 2	- age	-		■ 1 TI	oro is no prosi	umption of abuse	
(Spouse, if filing)				_	·	·	
United States	Eastern District of I Division	New York, Brook	dyn	а	pplies will be m	o determine if a presur nade under <i>Chapter 7 N</i> cial Form 122A-2).	•
Case numbe (if known)	r					does not apply now bedout it could apply later.	cause of qualified
				☐ Che	eck if this is a	n amended filing	
Official I	Form 122A - 1						
Chapte	r 7 Statement of Your Cur	rent Mor	nthly Inc	ome)		12/15
a separate she number (if kno military service	e and accurate as possible. If two married people at et to this form. Include the line number to which the wn). If you believe that you are exempted from a prepared and file Statement of Exemption from Foalculate Your Current Monthly Income	e additional infor esumption of abu	mation applies. use because you	On the tu do not	top of any additi have primarily	onal pages, write your i	name and case ause of qualifying
1. What is	your marital and filing status? Check one only	/.					
■ Not	married. Fill out Column A, lines 2-11.						
☐ Marr	ried and your spouse is filing with you. Fill out	both Columns	A and B, lines 2	2-11.			
_	ied and your spouse is NOT filing with you. Y		•				
_	ving in the same household and are not legal						
р	ving separately or are legally separated. Fill o enalty of perjury that you and your spouse are lega part for reasons that do not include evading the M	ally separated un	nder nonbankru	ptcy law	that applies or	• • • • • • • • • • • • • • • • • • • •	
101(10A). F 6 months, a	verage monthly income that you received from all store example, if you are filing on September 15, the 6-month of the income for all 6 months and divide the total by 6 me rental property, put the income from that property in	onth period would Fill in the result.	be March 1 throu Do not include a	ıgh Augu ny incom	ist 31. If the amou	unt of your monthly incom han once. For example, if	ne varied during the
				Colum Debto		Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, a leductions).	nd commissior	ns (before all	\$	1,475.18	\$	
	y and maintenance payments. Do not include p B is filled in.	ayments from a	a spouse if	\$	0.00	\$	
of you of from an roomma	ounts from any source which are regularly pain or your dependents, including child support. unmarried partner, members of your household, yeates. Include regular contributions from a spouse include payments you listed on line 3	nclude regular	contributions	n. \$	0.00	\$	
5. Net ince	ome from operating a business, profession, o						
_			otor 1				
	eceipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>					
	y and necessary operating expenses nthly income from a business, profession, or farn		Copy here ->	\$	0.00	\$	
	ome from rental and other real property	1 \$	copy more	Ψ		—	
5. Het illet	sino il sini fontali dila ottici fedi property	Deb	otor 1				
Gross re	eceipts (before all deductions)	\$ 0.00					
	y and necessary operating expenses	-\$ 0.00					
Net mor	nthly income from rental or other real property	\$ 0.00	Copy here ->	•\$	0.00	\$	
7. Interest	, dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

Case number (if known)

						Column A Debtor 1		Column B Debtor 2 or non-filing sp	oouse	!
8.	Unem	nployr	ment compensation			\$	0.00	\$		
			r the amount if you contend that the amount re rity Act. Instead, list it here:	eceived was a benef	it under the					
	For	you	\$		0.00					
	For	your	spouse \$							
9.	Pensi	ion or	retirement income. Do not include any amo ocial Security Act.	ount received that wa	s a benefit	\$	0.00	\$		
10.	not inca	clude a	m all other sources not listed above. Sperany benefits received under the Social Securial war crime, a crime against humanity, or interv, list other sources on a separate page and p	ty Act or payments r national or domestic	eceived as	\$	0.00	\$		
					-	\$	0.00	\$		
			tel amounta from concrete names if any			Ψ		\$		
		10	tal amounts from separate pages, if any.		+	*	0.00	*		
11.			n. Then add the total for Column A to the to		\$	1,475.18	+ -		= \$	1,475.18
									income	urrent monthly
Part	2:	Dete	rmine Whether the Means Test Applies to	You						
12.	Calcu	ılate y	our current monthly income for the year.	Follow these steps:						
	12a. (Сору у	your total current monthly income from line 1	1		Сору	line 11 h	ere=>	\$	1,475.18
	ľ	Multipl	y by 12 (the number of months in a year)						x 1	2
	12b. ⁻	The re	sult is your annual income for this part of the	form				12b.	\$1	7,702.16
13.	Calcu	ılate ti	he median family income that applies to y	ou. Follow these ste	eps:					
	Fill in	the sta	ate in which you live.	NY						
	Fill in	the nu	umber of people in your household.	1						
	To fin	d a lis	edian family income for your state and size t of applicable median income amounts, go ist may also be available at the bankruptcy o	online using the link	specified i	n the separate	e instructi	13. ons for this	\$5	50,768.00
14.	How	do the	e lines compare?							
	14a.		Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1,	check box	1T,here is no p	resumptio	on of abuse.		
	14b.		Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box	2Ţhe presi	umption of abo	use is dete	ermined by For	m 122A-	2.
Part	3:	Sign	Below							
		By sigr	ning here, I declare under penalty of perjury the	nat the information o	n this stater	ment and in ar	ny attachm	nents is true and	d correct	
	v		Dataina Commission							
	Х		Patrice Cummings crice Cummings							
			nature of Debtor 1							
	Date	• Mai	rch 10, 2017							
			/DD /YYYY							
	I	f you	checked line 14a, do NOT fill out or file Forn	n 122A-2.						
		fvou	checked line 14h, fill out Form 1224-2 and fi	lo it with this form						

Debtor 1 Cummings, Patrice

Fill i	n this inforn	mation to identify you	ır case:		Check the appropriate box as directed in
Debt	or 1 F	Patrice Cummings			lines 40 or 42:
Debt (Spo	or 2 use, if filing)			_	According to the calculations required by this Statement:
(Opo	doo, ii iiii ig)		Footone District of Nov. Vord. Decolds	_	
Unite	ed States Bar	nkruptcy Court for the:	Eastern District of New York, Brookly Division	<u> </u>	■ 1. There is no presumption of abuse.
Case (if kn				_	2. There is a presumption of abuse.
~					☐ Check if this is an amended filing
		rm 122A - 2			
Ch	apter 7	Means Test	Calculation		04/16
To fil	l out this for	m, you will need your	completed copy of Chapter 7 Stater	nent of Your Current	Monthly Income (Official Form 122A-1).
is nee	eded, attach your name a		is form, Include the line number to v nown).		ally responsible for being accurate. If more space mation applies. On the top any additional pages,
		<u> </u>		4.6	
1.	Copy your t	total current monthly i	ncome. Copy line 1	1 from Official Form	122A-1 here=> \$ 1,475.18
2.	Did you fill o	out Column B in Part 1	of Form 122A-1?		
	■ No. Fill	in \$0 for the total on line	e 3.		
	☐ Yes. Is y	our spouse Filing with y	ou?		
	☐ No.	Go to line 3.			
	☐ Yes.	Fill in \$0 the total on	line 3.		
			me by subtracting any part of your sur dependents. Follow these steps:	spouse's income not	used to pay for the
	On line 11, C you or your d		-1, was any amount of the income you	eported for your spous	e NOT regularly used for the household expenses of
	■ No. Fill	in 0 for the total on line	3.		
	☐ Yes. Fill	in the information below	v:		
				_	
		• •	ch the income was used	Fill in the am are subtracti	
		cample, the income is us ort other than you or your	ed to pay your spouse's tax debt or to dependents.	your spouse'	
		, ,	•	\$	
	_			\$	
	_			\$	
	т	Fotal		\$0	.00
		i Otai.		Ф	
					Copy total here=> \$
4.	Adjust your	current monthly inco	me. Subtract line 3 from line 1.		\$1,475.18

Official Form 122A-2

ebtor 1	Cummings, Patrice	Case number (if known)				
art 2	Calculate Your Deductions from Y	ur Income				
Dec actuand	this form. This information may also be duct the expense amounts set out in lines 6- and expenses if they are higher than the star	ational and Local Standards for certain expense amounts. Use these amounts to the IRS standards, go online using the link specified in the separate instructions valiable at the bankruptcy clerk's office. To regardless of your actual expense. In later parts of the form, you will use some of your across. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 you subtracted from in income in lines 5 and 6 of form 122A-1. The reference of the separate instructions are the separate instructions. The separate instructions are the separate instructions are the separate instructions.				
Wh	enever this part of the from refers to you, it	eans both you and your spouse if Column B of Form 122A-1 is filled in.				
5.	The number of people used in determine	ng your deductions from income				
		aimed as exemptions on your federal income tax return, plus the you support. This number may be different from the number of 1 Living 0 Housing				
Nat	ional Standards You must use	e IRS National Standards to answer the questions in lines 6-7.				
6.7.	fill in the dollar amount for food, clothing, and other items. \$ 570.00					
Peo	pple who are under 65 years of age					
	7a. Out-of-pocket health care allowance	er person \$ 54				
	7b. Number of people who are under 65	X1				
	7c. Subtotal. Multiply line 7a by line 7b	\$\$ Copy here=> \$\$				
Peo	ople who are 65 years of age or older					
	7d. Out-of-pocket health care allowance	er person \$ 130				
	7e. Number of people who are 65 or old	X0				
	7f. Subtotal. Multiply line 7d by line 7e	\$ Copy here=> +\$ 0.00				
	7g. T otal. Add line 7c and line 7f	\$ 54.00 Copy total here=> \$ 54.00]			

Debtor 1

Debtor 1		Cummings, Patrice			Case number (if known)		
Loca	al Sta	andards You must use the IRS Local Standards to an	swer the questions	s in lines	s 8-15.		
		n information from the IRS, the U.S. Trustee Program is into two parts:	has divided the IF	RS Loc	al Standard for housing	for bankruptcy	
■н	ous	ing and utilities - Insurance and operating expenses					
■ H	ous	ing and utilities - Mortgage or rent expenses					
To a	nsw	rer the questions in lines 8-9, use the U.S. Trustee Pro	gram chart.				
		ne chart, go online using the link specified in the separate rt may also be available at the bankruptcy clerk's office.	e instructions for thi	is form.			
		using and utilities - Insurance and operating expenses dollar amount listed for your county for insurance and oper				fill in \$	612.00
9.	Ηοι	using and utilities - Mortgage or rent expenses:					
	9a.	Using the number of people you entered in line 5, fill in listed for your county for mortgage or rent expenses			\$ <u>1,</u>	753.00	
	9b.	Total average monthly payment for all mortgages and oth	ner debts secured by	y your h	nome.		
		To calculate the total average monthly payment, add all contractually due to each secured creditor in the 60 monbankruptcy. Then divide by 60.					
		Name of the creditor	Average monthly payment	y			
		-NONE-	\$				
					7		
		Total average monthly payment	\$	0.00	Copy here=> -\$	0.00 Repea amoun line 33	it on
	9c.	Net mortgage or rent expense.			J 		
		Subtract line 9b (total average monthly paymen) from li rent expense). If this amount is less than \$0, enter \$0.		r	\$1,753.00	Copy here=> \$	1,753.00
		ou claim that the U.S. Trustee Program's division of the calculation of your monthly expenses, fill in a				 nd	0.00
	Ex	plain why:					
11.	Loc	cal transportation expenses: Check the number of vehic	les for which you cl	laim an	ownership or operating exp	oense.	
		D. Go to line 14.					
		1. Go to line 12.					
		2 or more. Go to line 12.					
		nicle operation expense: Using the IRS Local Standards enses, fill in the Operating Costs that apply for your Censu				e operating \$	0.00

Debtor 1	Cumn	nings, Patrice			Case number (#	known)		
13.		wnership or lease expense: Using the IR laim the expense if you do not make any loa es.						
Ve	hicle 1	Describe Vehicle 1:						
13a.	. Ownershi	p or leasing costs using IRS Local Standa	rd		\$	0.00		
13b.	•	nonthly payment for all debts secured by Ve clude costs for leased vehicles.	hicle 1.					
		ate the average monthly payment here and ally due to each secured creditor in the 60 nde by 60.						
	Nam	e of each creditor for Vehicle 1		Average monthly payment				
				\$				
		Total Average Monthly Pa	yment	\$	Copy here => -\$	s	Repeat this amount on line 33b.	
		le 1 ownership or lease expense ine 13b from line 13a. if this amount is less	s than \$0,	enter \$0	\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
13d.	. Ownershi	p or leasing costs using IRS Local Standa	rd		\$	0.00		
13e.	. Average n leased vel	nonthly payment for all debts secured by Venicles.	hicle 2. D	o not include costs for				
	Nam	e of each creditor for Vehicle 2		Average monthly payment				
				\$				
		Total Average Monthly Pa	yment	\$	Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.		le 2 ownership or lease expense ine 13e from line 13d. if this amount is les	s than \$0,	enter \$0	\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.		ansportation expense: If you claimed 0 variation expense allowance regardless of whe				s, fill in th <i>Eul</i>	blic \$	173.00
15.	deduct a p	al public transportation expense: If you obtain transportation expense, you may fill in the IRS Local Standard for Public Transportation	what you					0.00

Debtor 1	Cummings, Patrice	Case number (if known)		
Othe	er Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.		
16.	self-employment taxes, Soc your pay for these taxes. Ho	mount that you will actually owe for federal, state and local taxes, such as income taxes, ial Security taxes, and Medicare taxes. You may include the monthly amount withheld from owever, if you expect to receive a tax refund, you must divide the expected refund by 12 and he total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, s	ales, or use taxes.	\$	232.89
17.	Involuntary deductions: a union dues, and uniform co	The total monthly payroll deductions that your job requires, such as retirement contributions, ssts.		
	Do not include amounts that	t are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	29.83
18.	together, include payments	nonthly premiums that you pay for your own term life insurance. If two married people are filing that you make for your spouse's term life insurance. Do not include premiums for life insurance on-filing spouse's life insurance, or for any form of life insurance other than term.	\$_	0.00
19.	Court-ordered payments: agency, such as spousal or	The total monthly amount that you pay as required by the order of a court or administrative child support payments.		
	Do not include payments o	n past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total month as a condition for your jo	nly amount that you pay for education that is either required:		
		ntally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total month	ly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
		r any elementary or secondary school education.	\$	0.00
22.	required for the health and	penses, excluding insurance costs: The monthly amount that you pay for health care that is welfare of you or your dependents and that is not reimbursed by insurance or paid by a health nly the amount that is more than the total entered in line 7.		
	Payments for health insurar	nce or health savings accounts should be listed only in line 25.	\$	0.00
23.	you and your dependents, s	elephone services: The total monthly amount that you pay for telecommunication services for uch as pagers, call waiting, caller identification, special long distance, or business cell phone sary for your health and welfare or that of your dependents or for the production of income, if it imployer.		
		or basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses a Add lines 6 through 23.	llowed under the IRS expense allowances.	\$	3,424.72

ebtor 1	Cummings, Patrice	Case number (if known)					
Add	itional Expense Deductions These a	are additional deductions allowed by the Means Test.					
	Note: D	o not include any expense allowances listed in lines 6-24.					
25.		and health savings account expenses. The monthly expenses for health savings accounts that are reasonably necessary for yourself, your spouse, or your					
	Health insurance	\$0.00_					
	Disability insurance	\$0.00					
	Health savings account	+ \$0.00_					
	Total	\$ Copy total here=>	\$	0.00			
	Do you actually spend this total amount?						
	☐ No. How much do you actually spe	end?					
	Yes	\$					
26.	Continued contributions to the care of continue to pay for the reasonable and nechousehold or member of your immediate facontributions to an account of a qualified A	\$	0.00				
27.	 Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. 						
	By law, the court must keep the nature of t	these expenses confidential.	\$	0.00			
28.	Additional home energy costs. Your ho	me energy costs are included in your insurance and operating expenses on line 8.					
	If you believe that you have home energy of then fill in the excess amount of home energy	costs that are more than the home energy costs included in expenses on line 8, ergy costs.					
	You must give your case trustee documen claimed is reasonable and necessary.	tation of your actual expenses, and you must show that the additional amount	\$	0.00			
29.	Education expenses for dependent chi \$160.42* per child) that you pay for your d elementary or secondary school.	ildren who are younger than 18. The monthly expenses (not more than ependent children who are younger than 18 years old to attend a private or public					
	You must give your case trustee documen reasonable and necessary and not already	tation of your actual expenses, and you must explain why the amount claimed is vaccounted for in lines 6-23.					
	* Subject to adjustment on 4/01/19, and ex	very 3 years after that for cases begun on or after the date of adjustment.	\$	0.00			
30.		The monthly amount by which your actual food and clothing expenses are higher wances in the IRS National Standards. That amount cannot be more than 5% of RS National Standards.					
	To find a chart showing the maximum add this form. This chart may also be available	itional allowance, go online using the link specified in the separate instructions for at the bankruptcy clerk's office.					
	You must show that the additional amount	claimed is reasonable and necessary.	\$	0.00			
31.	Continuing charitable contributions. This instruments to a religious or charitable org	he amount that you will continue to contribute in the form of cash or financial anization. 26 U.S.C. § 170(c)(1)-(2).	+\$	0.00			
32.	Add all of the additional expense dedu Add lines 25 through 31.	ctions.	\$	0.00			

Case number (if known)

Jeductio	ons for Debt Payment								
	lebts that are secured by an interes other secured debt, fill in lines 33a t	t in property that you own, including ho	me mo	rtgage	s, veh	icle loa	ıns,		
To ca	·	ent, add all amounts that are contractually o	due to e	ach se	cured c	reditor i	in		
M	lortgages on your home:							Avera payme	ge monthly
3a. C	Copy line 9b here						.=> ;	S	0.00
L	oans on your first two vehicles:								
3b. C	Copy line 13b here						.=> :	S	0.00
							.=> :	S	0.00
	ist other secured debts:								
Name of each creditor for other secured debt		Identify property that secures the debt			inclu	paymer de taxes ance?			
						No			
-N	ONE-					Yes		6	
		_			_	100	•		
						No			
		_				Yes	;	S	
						No			
						Yes	+5	,	
		_					¬ •		
							Сору		
3e. To	tal average monthly payment. Add lin	es 33a through 33d	:	\$		0.00	total here=	> \$	0.00
			L	-				•	
		ecured by your primary residence, a ve ort or the support of your dependents?	hicle, c	or					
_	lo. Go to line 35.								
	es. State any amount that you must	pay to a creditor, in addition to the payme ur property (called the <i>cure amount</i>). Next, ov.							
Name of	the creditor	Identify property that secures the debt			Fotal cu amount	re			onthly cure mount
-NONE	<u>-</u>			\$_			÷ 60 =	\$	
			Г				\neg		
							Copy		
			Total	\$		0.00	here=	> \$	0.0
		a priority tax, child support, or alimony	- that						
_	past due as of the filing date of your	рапктирtcy case? 11 U.S.C. § 507.							
	lo. Go to line 36.	nese priority claims. Do not include current	or one	oing					
ц 1	priority claims, such as those yo		or orig	onig					
	Total amount of all past-due pr	iority claims	9	:		0.00	÷ 60 =	\$	0.0

Debtor 1 Cummings, Patrice

Debtor 1	Cum	mings, Patrice		Case n	umber (if known	n)		
F	or more	eligible to file a case under Chapter 13? 11 U.S.C. § 10 information, go online using the link fo <i>Bankruptcy Basics</i> ns for this form. <i>Bankruptcy Basics</i> may also be available a	s specifi		ce.			
	No.	Go to line 37.						
		Fill in the following information.						
		Projected monthly plan payment if you were filing under C	Chapter	13 \$				
		Current multiplier for your district as stated on the list issu Administrative Office of the United States Courts (for dis and North Carolina) or by the Executive Office for United all other districts).	stricts in	ı Alabama				
		To find a list of district multipliers that includes your distributed in the separate instructions for this form. To available at the bankruptcy clerk's office.				Co	py total	
		Average monthly administrative expense if you were filing	under (Chapter 13	\$	he	re=> \$	
		of the deductions for debt payment. s 33e through 36.					\$	0.00
Total	Deduct	tions from Income						
38. A	dd all o	f the allowed deductions.						
		e 24,All of the expenses allowed under IRS e allowances	\$_	3,424.72				
(Copy lin	e 32, All of the additional expense deductions	\$	0.00				
(Copy lin	e 37,All of the deductions for debt payment	+\$	0.00	_			
		Total deductions	\$_	3,424.72	Copy total	here	=> \$	3,424.72
Part 3:	Det	ermine Whether There is a Presumption of Abuse			_			
39. C	alculate	e monthly disposable income for 60 months						
		py line 4, adjusted current monthly income	\$	1,475.18				
;	39b. Co	py line 38, <i>Total deductions</i>	- \$ _	3,424.72				
;		onthly disposable income. 11 U.S.C. § 707(b)(2). btract line 39b from line 39a	\$_	0.00	Copy here=>\$		0.00	
ı	For the r	next 60 months (5 years)				x 60		
;	39d. To ʻ	tal. Multiply line 39c by 60		\$	0.00	Copy here=>	\$	0.00
40. F i	ind out	whether there is a presumption of abuse. Check the b	ox that	applies:		J		
	■ The li	ine 39d is less than \$7,700*. On the top of page 1 of this	form, c	heck box 1, There is	no presuma	otion of abu	se. Go to Pa	rt 5.
	The li	ine 39d is more than \$12,850*. On the top of page 1 of the claim special circumstances. Go to Part 5.						
г	_ `	ciaim special circumstances. Go to Part 5. ine 39d is at least \$7,700*, but not more than \$12,850*	Co to	lino 41				
	ı ile i	ine 330 is at least \$1,100, but not more than \$12,030"	. 60 10	IIII C 4 1.		ent.		

ebtor 1	Cun	nmings, Patrice	Case number (if known)				
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled of Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.	out <i>A</i> 41a. \$ X .25				
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i) Multiply line 41a by 0.25					
of	your ı	ne whether the income you have left over after subtracting all allowed de unsecured, nonpriority debt. ne box that applies:					
		39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>The</i> p Part 5.	ere is no presumption of abuse.				
		39d is equal to or more than line 41b. On the top of page 1 of this form, che se. You may fill out Part 4 if you claim special circumstances. Then go to Part					
Part 4:	Giv	ve Details About Special Circumstances					
reaso	onable	ve any special circumstances that justify additional expenses or adjustment alternative? 11 U.S.C. § 707(b)(2)(B). to to Part 5.	nents of current monthly income for which there is no				
□ Y		II in the following information. All figures should reflect your average monthly expou may include expenses you listed in line 25.	pense or income adjustment for each item.				
	ne	ou must give a detailed explanation of the special circumstances that make the eccessary and reasonable. You must also give your case trustee documentation of the special circumstances that make the eccessary and reasonable. You must also give your case trustee documentation of the special circumstances that make the eccessary and reasonable.					
	G	Give a detailed explanation of the special circumstances	Average monthly expense or income adjustment				
			\$				
			\$				
			\$				
			\$				
Part 5:	l sic	gn Below	·				
art J.	,	igning here, I declare under penalty of perjury that the information on this statem	nent and in any attachments is true and correct.				
	-	/ Patrice Cummings	· · · · · · · · · · · · · · · · · · ·				
	Pa	atrice Cummings					
Da		gnature of Debtor 1					
Da		arch 10, 2017 M / DD / YYYY					

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$245	5	filing fee	•
\$75	5	administrative fee	
+ \$15	5_	trustee surcharge	
\$335	5	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 1-17-41151-cec Doc 1 Filed 03/10/17 Entered 03/10/17 12:17:36

B201B (Form 201B) (12/09)

United States Bankruptcy Court Eastern District of New York, Brooklyn Division

IN RE:	Case No			
Cummings, Patrice	Chapter 7			
Debtor(s)	•			
CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)				

UNDER § 342(b) OF THE BANKRUPTCY CODE						
Certificate of [Non-Attorney] Bankruptcy Petition Preparer						
I, the [non-attorney] bankruptcy petition preparentice, as required by § 342(b) of the Bankrupt	rer signing the debtor's petition, hereby certify that I delive cy Code.	ered to the debtor the attached				
Printed Name and title, if any, of Bankruptcy P Address:	petition prepa the Social Sec principal, resp	ty number (If the bankruptcy arer is not an individual, state curity number of the officer, consible person, or partner of y petition preparer.)				
X	(Required by	11 U.S.C. § 110.)				
Signature of Bankruptcy Petition Preparer of or partner whose Social Security number is provide						
	Certificate of the Debtor					
I (We), the debtor(s), affirm that I (we) have re	ceived and read the attached notice, as required by § 342(b	o) of the Bankruptcy Code.				
Cummings, Patrice	X /s/ Patrice Cummings	3/10/2017				
Printed Name(s) of Debtor(s)	Signature of Debtor	Date				
Case No. (if known)	X					

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Signature of Joint Debtor (if any)

Date

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